

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214506769			
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: ENLISTED ASSOCIATION OF THE NATIONAL GUARD OF THE UNITED STATES</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: J CASEY FORRESTER 6035 BURKE CENTRE PARKWAY SUITE 270 BURKE, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: MS</p> </div> <div style="width: 35%;"> <p>DUE DATE: 1/31/2014</p> <p>SCC ID NO: F1883885</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	
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6.) PRINCIPAL OFFICE ADDRESS: <div style="text-align: center;"> ADDRESS: 3133 MOUNT VERNON AVE. CITY/ST/ZIP: ALEXANDRIA, VA 22305 </div>					
7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: ROGER A. HAGAN TITLE: PAST PRESIDENT ADDRESS: 3133 MOUNT VERNON AVE CITY/ST/ZIP/CO: ALEXANDRIA, VA 22305 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: ROGER A. HAGAN TITLE: PAST PRESIDENT ADDRESS: 3133 MOUNT VERNON AVE CITY/ST/ZIP/CO: ALEXANDRIA, VA 22305	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR
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NAME: MICHAEL ARNOLD TITLE: DIRECTOR ADDRESS: 3133 MOUNT VERNON AVE CITY/ST/ZIP/CO: ALEXANDRIA, VA 22305	<input type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR			

NAME:	KAREN CRAIG	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3133 MOUNT VERNON AVE		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22305		
NAME:	MIREYA O CRUZ	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3133 MOUNT VERNON AVE		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22305		
NAME:	ANDREW SCOTT EVANS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3133 MOUNT VERNON AVE		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22305		
NAME:	JEFFREY J FRISBY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3133 MOUNT VERNON AVE		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22305		
NAME:	JOHN M HARRIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3133 MOUNT VERNON AVE		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22305		
NAME:	CLAUDE P IMAGNA	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3133 MOUNT VERNON AVE		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22305		
NAME:	JAMES C BROWN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3133 MOUNT VERNON AVE		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22305		
NAME:	DON A MAPES	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3133 MOUNT VERNON AVE		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22305		
NAME:	FRANK YOAKUM	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3133 MOUNT VERNON AVE		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22305		
NAME:	JOEL MUTSCHLER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3133 MOUNT VERNON AVE		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22305		
NAME:	MICHAEL STAFFORD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3133 MOUNT VERNON AVE		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22305		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DANIEL B REILLY DIRECTOR 3133 MOUNT VERNON AVE ALEXANDRIA, VA 22305	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL RICE DIRECTOR 3133 MOUNT VERNON AVE ALEXANDRIA, VA 22305	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RODNEY SPADE DIRECTOR 3133 MOUNT VERNON AVE ALEXANDRIA, VA 22305	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANDREW STRAUSS DIRECTOR 3133 MOUNT VERNON AVE ALEXANDRIA, VA 22305	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEPHEN L BURRIS DIRECTOR 3133 MOUNT VERNON AVE ALEXANDRIA, VA 22305	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ETHAN TOYAMA DIRECTOR 3133 MOUNT VERNON AVE ALEXANDRIA, VA 22305	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JESSE WAYLAND DIRECTOR 3133 MOUNT VERNON AVE ALEXANDRIA, VA 22305	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DON A WOOD DIRECTOR 3133 MOUNT VERNON AVE ALEXANDRIA, VA 22305	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSE ESCOBAR DIRECTOR 3133 MOUNT VERNON AVE. ALEXANDRIA, VA 22305	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ JOHN F. HELBERT SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JOHN F. HELBERT, PRESIDENT PRINTED NAME AND CORPORATE TITLE	1/31/2014 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			